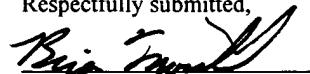


## EXPRESS MAIL LABEL NO. EV289510878US

<b>PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a)</b>		Attorney Docket Number LEX-011															
<p><i>O I P E</i> OCT 23 2003 PATENT &amp; TRADEMARK OFFICE</p> <p>In re Application of Gillies et al. Application Serial No. 09/780,668 Filed: February 9, 2001 Group Art Unit: 1644      Examiner: Saunders, David A.</p>																	
<p>This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a response in the above entitled application.</p> <p>The requested extension and appropriate non-small-entity fee are as follows (check time period desired)</p> <table border="1"> <tr> <td><input type="checkbox"/></td> <td>One month (37 CFR 1.17(a)(1))</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Two months (37 CFR 1.17(a)(2))</td> <td>\$</td> </tr> <tr> <td><input checked="" type="checkbox"/></td> <td>Three months (37 CFR 1.17(a)(3))</td> <td>\$ 950.00</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Four months (37 CFR 1.17(a)(4))</td> <td>\$</td> </tr> <tr> <td><input type="checkbox"/></td> <td>Five months (37 CFR 1.17(a)(5))</td> <td>\$</td> </tr> </table> <p><input type="checkbox"/> Applicant claims small entity status under 37 CFR 1.27, therefore the fee amount shown above is reduced by one-half, and the resulting fee is: \$_____.</p> <p><input checked="" type="checkbox"/> A check in the amount of the fee is enclosed.</p> <p><input type="checkbox"/> The Commissioner is hereby authorized to charge the required fee to Deposit Account No. 20-0531. Enclosed is a duplicate of this sheet.</p> <p><input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any additional fees which may be required, or credit any overpayment, to Deposit Account No. 20-0531.</p> <p><input checked="" type="checkbox"/> Return receipt postcard enclosed.</p> <p>I am the <input type="checkbox"/> assignee of record of the entire interest.  <input type="checkbox"/> applicant.  <input checked="" type="checkbox"/> attorney or agent of record.  <input type="checkbox"/> attorney or agent under 37 CFR 1.34(a).  Registration number if acting under 37 CFR 1.34(a). _____.</p>			<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$	<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$	<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 950.00	<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$	<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$
<input type="checkbox"/>	One month (37 CFR 1.17(a)(1))	\$															
<input type="checkbox"/>	Two months (37 CFR 1.17(a)(2))	\$															
<input checked="" type="checkbox"/>	Three months (37 CFR 1.17(a)(3))	\$ 950.00															
<input type="checkbox"/>	Four months (37 CFR 1.17(a)(4))	\$															
<input type="checkbox"/>	Five months (37 CFR 1.17(a)(5))	\$															
<b>CORRESPONDENCE ADDRESS</b>		<b>SIGNATURE BLOCK</b>															
<p>Direct all correspondence to: Patent Administrator Testa, Hurwitz &amp; Thibeault, LLP High Street Tower 125 High Street Boston, MA 02110 Tel. No.: (617) 248-7000 Fax No.: (617) 248-7100</p>		<p>Respectfully submitted,    Brian A. Fairchild, Ph.D.  Atty/Agent for Applicant(s)  Testa, Hurwitz &amp; Thibeault, LLP  High Street Tower  125 High Street  Boston, MA 02110</p>															

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